

ALEXANDER W DAVIES CHARITABLE TRUST

GRANT APPLICATION FORM

APPLICATION FOR PRIMARY SCHOOL CHILDREN

For Completion by Parent/Guardian or Teacher

Please complete and submit this form to Lynne.Burke@ledinghamchalmers.com

CRITERIA FOR APPLICANTS

To be eligible for consideration of a grant, the applicant must fall under one or more of the following categories: -

Category 1: The applicant was born in the Parish of Lumphanan or his/her parents were resident in Lumphanan at the time of the applicant's birth.

Category 2: The applicant has lived in the Parish of Lumphanan for five years before the application and continues to live there.

Category 3: The applicant was born in either the Parish of Torphins or Kincardine O'Neil, or the applicant's parents were resident within either of these Parishes at the time of the applicant's birth; or the applicant has lived within either of the Parishes for five years prior to making the application, and continues to live there.

Please return all completed application forms to Lynne.burke@ledinghamchalmers.com OR by post to Ledingham Chalmers LLP, Johnstone House, 52-54 Rose Street, Aberdeen, AB10 1HA.

The Alexander W Davies Trust is a registered Charity, Registration No. SC024169.

Details of Child

Full Name: _____

Address: _____

Post Code: _____

Date of Birth: _____

(Copy birth certificate required to be provided alongside application)

Place of Child's Birth: _____

Please select which of the following best describes the child's family circumstances: -

- Resident with both parents

- Resident with one parent and second parent paying child maintenance

- Resident with one parent and second parent not paying child maintenance

- Resident with one parent and a step parent who provides for the household financially

Please return all completed application forms to Lynne.burke@ledinghamchalmers.com OR by post to Ledingham Chalmers LLP, Johnstone House, 52-54 Rose Street, Aberdeen, AB10 1HA.

The Alexander W Davies Trust is a registered Charity, Registration No. SC024169.

Details of Parent/Guardian

Title: _____

Full Name: _____

Current Address: _____

Post Code: _____

Number of years' resident at current home address: _____

(current years' council tax form required to be provided alongside application)

Parent/guardians Address at time of child's birth:

Post Code: _____

Telephone Number: _____

Email Address: _____

Occupation/Former Occupation: _____

Date of Birth: _____

Please return all completed application forms to Lynne.burke@ledinghamchalmers.com OR by post to Ledingham Chalmers LLP, Johnstone House, 52-54 Rose Street, Aberdeen, AB10 1HA.

The Alexander W Davies Trust is a registered Charity, Registration No. SC024169.

Place of Birth: _____

Have you ever previously applied to the Trust for any child?

YES / NO

If YES was your application successful?

YES / NO

Date of previous application: _____

Was the previous application for the same child as the current application?

YES / NO

If NO, please provide the name of the child the previous application was for: _____

Reason for previous application:

Names and ages of all dependent children:

How many of your dependent children are in fulltime education? _____

Please return all completed application forms to Lynne.burke@ledinghamchalmers.com OR by post to Ledingham Chalmers LLP, Johnstone House, 52-54 Rose Street, Aberdeen, AB10 1HA.

The Alexander W Davies Trust is a registered Charity, Registration No. SC024169.

What school(s) do your children attend and what fees (if any) are being paid to the school?

Please return all completed application forms to Lynne.burke@ledinghamchalmers.com OR by post to Ledingham Chalmers LLP, Johnstone House, 52-54 Rose Street, Aberdeen, AB10 1HA.

The Alexander W Davies Trust is a registered Charity, Registration No. SC024169.

Financial Information of Parents/Guardians

Applicants are required to submit the previous years' P60 form and HMRC letter regarding any benefits for both parents (unless the child is from a single parent household) alongside this application form.

Gross Annual income of both parents/parent/guardian the child resides with

Salary	
Maintenance payments	
Child benefits	
Other benefits (please specify which)	
Investment income	
Other	
TOTAL PER MONTH	£

Monthly Expenditure of both Parents/ guardians the child resides with

Mortgage/rent	
Pension/life insurance premiums	
Loan/repayments	
Council Tax	
Utilities	
Phone	
Wifi	
Food	
Other (please specify)	
TOTAL PER MONTH	£

Capital Assets

Asset	Value
House	
Savings/Investments	
Bank/Building Society Accounts	
Other (please specify)	
TOTAL PER MONTH	£

Please return all completed application forms to Lynne.burke@ledinghamchalmers.com OR by post to Ledingham Chalmers LLP, Johnstone House, 52-54 Rose Street, Aberdeen, AB10 1HA.

The Alexander W Davies Trust is a registered Charity, Registration No. SC024169.

Declaration

I, (parent/guardian) _____

Certify that: -

- (a) All of the information contained in all pages of this application is correct to the best of my knowledge.

- (b) I shall inform the Trustees of any change in financial circumstances, or any permanent change of address occurring during the period of the grant.

- (c) I undertake that if awarded a grant, the funds will be used solely for the purposes detailed in this application, and I shall refund any amount of the grant received in the event that the funds are no longer required. (e.g. cancellation of trip, or tutoring no longer required etc.)

.....

Signature of Parent/Guardian/Teacher

Date of signing

Checklist of Evidence Required

All requested evidence must be provided before the Trustees will review an application.

Before submitting this application to Ledingham Chalmers LLP, please ensure that you have included the following evidence: -

- Proof of household income in the form of a P60 for ALL parents/guardian in the household.
- Child's birth certificate.
- Documentation relative to any grants being received from other sources for the child.
- Current years council tax form.
- Passport/photograph ID for both the parent/guardian and child.
- Proof of costs relating to this application justifying the sum requested.
- Supporting letter from school/tutor confirming the costs requested (if request is for school trip or tutoring).
- Bank details for the receiving account of any potential payments. This should be provided as a bank statement and in pdf form.
- Proof of other income and/or expenditure where included throughout the application. This should show where the income/expenditure is coming from and the amount of the income/expense.
- Families receiving income from self-employment must provide the Trustees with a copy of their business audited accounts for the latest 3 years.

Please confirm that: -

The application has been fully completed and signed

YES / NO

If no, please explain why:

All required evidence has been provided in support of this application

YES / NO

If no, please explain why:

Please return all completed application forms to Lynne.burke@ledinghamchalmers.com OR by post to Ledingham Chalmers LLP, Johnstone House, 52-54 Rose Street, Aberdeen, AB10 1HA.

The Trustees would be grateful if you could take a minute to answer the following question.

Please confirm where you heard about the Trust:

- A. Through the local school
- B. Through word of mouth
- C. Through advertising
- D. Through the posters in each village
- E. Other

If other, please specify below:

Please return all completed application forms to Lynne.burke@ledinghamchalmers.com OR by post to Ledingham Chalmers LLP, Johnstone House, 52-54 Rose Street, Aberdeen, AB10 1HA.

The Alexander W Davies Trust is a registered Charity, Registration No. SC024169.